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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.	
First Inventor	. s 406.
Title	0/0
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TRA	NSMITTAL	Title			0/0
	nal applications under 37 CFR 1.53(b)) Expr	ess Mail Label No.		S D D
APPLICA	TION ELEMENTS	A		Assistant Commis Box Patent Applic	ssioner for Patents ation
	cerning utility patent application conter	nts.		Washington, DC	20231
1. X Fee Transmittal Fe (Submit an original and a Applicant claims s See 37 CFR 1.27. 3. X Specification (preferred arrangement - Descriptive title - Cross Reference - Statement Regisher - Reference to se or a computer p - Background of - Brief Summary	orm (e.g., PTO/SB/17) duplicate for fee processing) mall entity status. [Total Pages 27] set forth below) of the invention the to Related Applications arding Fed sponsored R & Dequence listing, a table, program listing appendix the Invention of the Invention of the Drawings (if filed) ption Disclosure	7. 8. 2 1 1 1 1	CD-ROM or CD-Computer Progra Nucleotide and/or Amino (if applicable, all necess). Computer Read Computer Read	R in duplicate, lar am (Appendix) o Acid Sequence sary) dable Form (CRF nce Listing on: M or CD-R (2 coprifying identity of GAPPLICAT pers (cover sheet a Statement an assignee) ation Document (iclosure 5)/PTO-1449	rge table or Submission Dies); or Subove copies TON PARTS & document(s)) Power of Attorney
i. Copy from a (for continua) i. DELET Signed stanamed in to 1.63(d)(2) Application Data	uted (original or copy) prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed) ION OF INVENTOR(S) Itement attached deleting inventor(s) the prior application, see 37 CFR and 1.33(b). Sheet. See 37 CFR 1.76 CATION, check appropriate box, and	1 1 1	Should be specified Copy (if foreign priori) Nonpublication (b)(2)(B)(i). Apport its equivalen Other:	Postcard (MPEF cifically itemized) of Priority Docum ity is claimed) Request under 3 blicant must attac it.	nent(s) 35 U.S.C. 122 th form PTO/SB/35
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation					
	19. CORRESPO	NDENCE A	ADDRESS		
Customer Number or Bar Co	ode Label (Insert Gustamen No. or Alte	ch bar cade lat	or	Correspondence	e address below
Name	Joshua Ford				
Address	Wireless Multimed 2530 Meridian Par				
City	Durham	State		Zip Code	27713
Country		Telephone		37 Fax	919/806-48
Name (Print/Type)		F	egistration No. (Attori	ney/Agent)	
Signature				Date	

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Patent fees are subject to annual revision.

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Complete if Known				
Application Number				
Filing Date				
First Named Inventor				
Examiner Name				
Group Art Unit				
Attorney Docket No.				

, L	METHOD OF PAYMENT	FEE CALCULATION (continued)					
	The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES					
- [indicated fees and credit any overpayments to: Deposit	Large Small					
	Account Number	Entity Entity Fee Fee Fee Fee Fee Paid					
١	Deposit	Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)					
	Account	105 130 205 65 Surcharge - late filing fee or oath					
1	Name Charge Any Additional Fee Required Under 37 CFR 1 16 and 1 17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet					
1	Applicant claims small entity status.	139 130 139 130 Non-English specification					
	See 37 CFR 1 27	147 2,520 147 2,520 For filing a request for ex parte reexamination					
\$ 1 **	2. X Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to					
90° 50° 50° 50° 50° 50° 50° 50° 50° 50° 5	Check Credit card Money Other	Examiner action					
4	FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action					
2.5 3.5 38	1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month					
	Large Entity Small Entity	116 400 216 200 Extension for reply within second month					
1	Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920 217 460 Extension for reply within third month					
鳞		118 1,440 218 720 Extension for reply within fourth month					
2,4	101 740 201 370 Utility filing fee \$370.0	128 1,960 228 980 Extension for reply within fifth month					
	107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal					
erdir eron	108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal					
	114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing					
ij	21177774 (1)	138 1,510 138 1,510 Petition to institute a public use proceeding					
أأولي	SUBTOTAL (1) (\$)370_00	140 110 240 55 Petition to revive - unavoidable					
	2. EXTRA CLAIM FEES Fee from	141 1,280 241 640 Petition to revive - unintentional					
,	Extra Claims below Fee Paid	d 142 1,280 242 640 Utility issue fee (or reissue)					
1	Total Claims -20** = X =	143 460 243 230 Design issue fee					
١	Independent Claims X = X	144 620 244 310 Plant issue fee					
- 1	Multiple Dependent	122 130 122 130 Petitions to the Commissioner					
١	A chief Participal (N.P. 19)	123 50 123 50 Processing fee under 37 CFR 1 17(q)					
٠ ا	Large Entity Small Entity Fee Fee Fee Fee Pescription	126 180 126 180 Submission of Information Disclosure Stmt					
- [Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per					
	103 18 203 9 Claims in excess of 20	property (times number of properties)					
	102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a))					
- [104 280 204 140 Multiple dependent claim, if not paid	149 740 249 370 For each additional invention to be					
١	109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))					
1	110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)					
	and over original patent	169 900 169 900 Request for expedited examination					
	SUBTOTAL (2) (\$) 0	of a design application Other fee (specify)					
١	SUBTOTAL (2)						
Į	**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$\frac{(\\$)}{0}}					

SUBMITTED BY

Name (Print/Type)

Josh Ford

Registration No. (Attorney/Agent)

Signature

Complete (if applicable)

Telephone 919/806-4537

Date 10/23/2001

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